

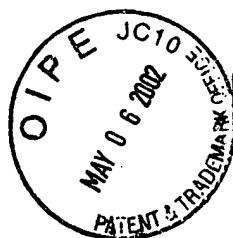
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PTO/SB/01 (03-01)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	960296.97711
First Named Inventor	Michael N. Gould
COMPLETE IF KNOWN	
Application Number	10/014,724
Filing Date	November 7, 2001
Group Art Unit	3736
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MONOTERPENES AND SESQUITERPENES AS CHEMOTHERAPEUTIC AND RADIATION
SENSITIZERS AND IMMUNOMODULATORS

(Title of the Invention)

The specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) November 7, 2001 as United States Application Number or PCT International

Application Number 10/014,724 and was amended on (MM/DD/YYYY) n/a (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual user. Any comments on the quality of this form are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT FOLD HERE OR COMPLETED FORMS TO THIS ADDRESS. Send TO: Assistant Commissioner for Patents, Washington, DC 20231.

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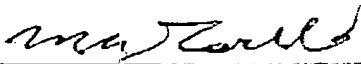

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DECLARATION — Utility or Design Patent Application

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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are true and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of this application or any patent issued hereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Michael N.		Family Name or Surname	
Inventor's Signature				Date	
Residence: City		Madison		State	
WI		Country		USA	
Mailing Address		13 South Blackhawk Avenue			
Mailing Address					
City		Madison		State	
WI		ZIP		53705	
Country		USA			
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Steven P.		Family Name or Surname	
Inventor's Signature				Date	
Residence: City		Madison		State	
WI		Country		USA	
Mailing Address		5945 Seminole Court, #4			
Mailing Address					
City		Madison		State	
WI		ZIP		53711	
Country		USA			
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplement if Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

(Page 2 of 2)

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Deepika		Rajesh	
Inventor's Signature <i>Deepika Rajesh</i>		Date 4-25-02	
Residence: City	State	Country	Citizenship
Madison	WI	USA	INDIA 9/29/02
Mailing Address 5413 Regent Street			
Mailing Address			
City	State	ZIP	Country
Madison	WI	53705	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
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